Name	e of Person Filing Document Name:		
Your	Address: City, State, Zip Code:		
Your	Telephone Number:		
Repre	esenting \square Self (without a lawyer) or \square	Attorney for	
		R COURT OF ARIZONA RICOPA COUNTY	
In the	Matter of the Estate of	Case No:	
		WAIVER OF BOND	
an	Adult a Minor, deceased		
THE	UNDERSIGNED PERSON STATE	S AS FOLLOWS:	
1.	I am a (check one box) (only if there is no Will) heir of (only if there is a Will) person r	f the decedent's estate without a Will or named in the decedent's Will.	
2.	The person who is applying to be the Pe	·	
	(name)		
	has estimated that the total value of the	estate of the person who died is \$	
3.	I waive any and all bond in connection w the court not require any bond in this pro	with his or her appointment as Personal Representative. occeeding.	I ask that
		Signature	
	TE OF ARIZONA) ICOPA COUNTY)ss.		
Subso	cribed and sworn to before me this date:	by	
My Co	ommission Expires:	Deputy Clerk/Notary Public	